HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWA: STATE ETHIOS COMMISSION

LOBBYIST REGISTRATION FORM (Type or Print Clearly)

PARTI LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
BURNS	Thomas	A	3606420770
MAILING ADDRESS (Street)			FAX
800 NE Ten	nney Pd	#110-235	5032246/98 Clip Code)
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Vancouver	WH	90	1687
EMPLOYING ORGANIZATION (Fill in only	r if you are employed by a business e	entity which has been retained to lobby) TELEPHONE
MAILING ADDRESS (Street)			FAX
			,
(City)	(State)	(2	ip Code)
PART II ORGANIZATION			
PART II ORGANIZATION NAME OF ORGANIZATION YOU LOB	BY FOR (Do not abbreviate)		TELEPHONE
NAME OF ORGANIZATION YOU LOB	- 4 7		
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NAME OF ORGANIZATION YOU LOB! ORGANIZATION YOU LOB! MAILING ADDRESS (Street)	Kline		
NAME OF ORGANIZATION YOU LOB! ORGANIZATION YOU LOB! MAILING ADDRESS (Street)	Kline	£500	602-3875211 FAX 602-387-4063
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NAME OF ORGANIZATION YOU LOB! ORGANIZATION YOU LOB! MAILING ADDRESS (Street)	Kline	\$500	602-3875211 FAX 602-387-4063
NAME OF ORGANIZATION YOU LOBI Cay of Smith MAILING ADDRESS (Street) 2375 E. Cam	Kline elback Rd (State) AZ	(4	602-3875211 FAX 602-387-4063
NAME OF ORGANIZATION YOU LOBI Clay of Smith MAILING ADDRESS (Street) 2375 E. Cam (City) Phoenix NAME OF PERSON RESPONSIBLE FOR I	Kline Lelback Rd (State) AZ PREPARING ORGANIZATION'S E	(4	602-3875211 FAX 602-387-4063 Cip Code) 83016 TELEPHONE
NAME OF ORGANIZATION YOU LOBI MAILING ADDRESS (Street) 2375 E. Cam (City) Phoenix	Kline Lelback Rd (State) AZ PREPARING ORGANIZATION'S E	(2 EXPENDITURES STATEMENT	602-3875211 FAX 602-387-4063 Elip Code) 83016 TELEPHONE 507-274-6196 FAX
NAME OF ORGANIZATION YOU LOBI CAYO MILES (Street) 2375 E. Cam (City) NAME OF PERSON RESPONSIBLE FOR I MAILING ADDRESS (Street)	Kline elback Rd (State) AZ PREPARING ORGANIZATION'S E	EXPENDITURES STATEMENT	602-3875211 FAX 602-387-4063 Cip Code) 83016 TELEPHONE 503-224-6198
NAME OF ORGANIZATION YOU LOBI CAYO MILA MAILING ADDRESS (Street) 2375 E. Cam (City) Phoenix NAME OF PERSON RESPONSIBLE FOR I	Kline Lelback Rd (State) AZ PREPARING ORGANIZATION'S E	EXPENDITURES STATEMENT // U-255	602-3875211 FAX 602-387-4063 Elip Code) 83016 TELEPHONE 507-274-6196 FAX

PART	III DESCRIPTION OF SU	IBJECTS UPON WHICH Y	OU EXPECT TO LOBBY	7	
, ,	Agriculture .	Education	. Human Services		Science, Technology & Economic Development
	Communications & Public Utilities	Government Operations & Finance	intergovernmental Relatio	ns, · · · · · · · · · · · · · · · · · · ·	Fourism & Recreation
	Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	٦	Fransportation
	Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	•	Other: (indicate below)
, .	Ecology, Energy Environmental Protection	Housing	Public Safety & Correction	ns .	
PART					
1	hereby certify tight the Inform	nation furnished above is, t	o the best of my knowled	gę, correct a	nd complete.
	1 111/1/21	44.	11	131/2.	
— <i>/</i>	(Sign	VVM_ ature of Lobbyist)		(Date)	
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PART	V AUTHORIZATION TO	LOBBY			
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